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PTO/SB/01 (3-97)

Approved for use through 6/30/98. OMB 0651-0032

Patent and Trademark Office; US DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	Attorney Docket No.	W02/025-0
	First Named Inventor	Jeffrey S. Mann
	COMPLETE IF KNOWN	
	Application No.	
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial filing	<input type="checkbox"/> Declaration submitted after initial filing	Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**RIFFLE DISTRIBUTOR ASSEMBLY FOR A FOSSIL FUEL FIRED
COMBUSTION ARRANGEMENT**

(Title of the Invention)

the specification of which

☒ is attached hereto
or

☐ was filed on _____, as United States Application Number or PCT International Application Number:
_____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number (s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Please type a plus sign in this box:

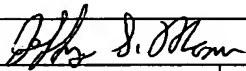
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DECLARATION - Utility Or Design Patent Application							
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the matter provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
U.S Parent Application Number		PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto							
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:							
<input type="checkbox"/> Customer Number Or <input checked="" type="checkbox"/> Registered practitioner(s) name/registration number listed below							
						Place Customer Number Bar Code Label Here	
Name		Registration Number		Name		Registration Number	
Arthur E. Fournier, Jr. Russell W. Warnock		22,816 32,860					
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.							
Direct all correspondence to <input type="checkbox"/> Customer Number or Bar Code Label				or <input checked="" type="checkbox"/> Correspondence Address below			
Attorney		Russell W. Warnock, Esq.					
Firm Name		ALSTOM Power Inc.					
Address		2000 Day Hill Road					
City, State, Zip		Windsor, CT 06095					
Country		US		Telephone		860-285-2839	
				Fax		860-285-3515	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of First Inventor				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Jeffrey Scott				Mann			
Inventor's Signature						Dated 1/22/04	
Residence: City		Windsor		State		CT	
				Country		US	
Post Office Address		86 Club House Road					
City		Windsor		State		CT	
				Zip		06095	
				Country		US	
Name of Second Inventor				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Dated	
Residence: City				State			
				Country			
Post Office Address							
City				State			
				Zip			
				Country			